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United States Bankruptcy	Court					
Northern District of Illi	Voluntary Petition					
Name of Debtor (if individual, enter Last, First, Middle): SHARP-BROWN, BELINDA	Name of Joint Debtor (Spouse) (Last, Fr	rrst, Middle):				
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):  BELINDA SHARP	All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):					
Last four digits of Soc.Sec.No./Complete EIN or other Tax I.D. No. (if more than one, state all): XXX-XX-7915	Last four digits of Soc.Sec.No./Complete EIN (if more than one, state all):	or other Tax I.D. No.				
Street Address of Debtor (No. & Street, City, State & Zip Code): 270 CLYDE AVENUE CALUMET CITY, IL 60409-1713	Street Address of Joint Debtor (No. & S	treet, City, State & Zip Code):				
County of Residence or of the Principal Place of Business: Cook	County of Residence or of the Princip	al Place of Business:				
Mailing Address of Debtor (if different from street address):  Same as above	Mailing Address of Joint Debtor (if diffe	erent from street address):				
Location of Principal Assets of Business Debtor (if different from stre		Boxes)				
Venue (Check any applicable box)  [ ] Debtor has been domiciled or has had a residence, principal place of busine this petition or for a longer part of such 180 days than in any other District.  [ ] There is a bankruptcy case concerning debtor's affiliate, general partner, or		lays immediately preceding the date of				
Type of Debtor (Check all boxes that apply)  [X] Individual(s) [ ] Railroad  [ ] Corporation [ ] Stockbroker  [ ] Partnership [ ] Commodity Broker  [ ] Other [ ] Clearing Bank	Chapter or Section of Bankruptcy Code (Check one box)  [ ] Chapter 7	[X] Chapter 13				
Nature of Debts (Check one box)  [X] Consumer/Non-Business [ ] Business  Chapter 11 Small Business (Check all boxes that apply)  [ ] Debtor is a small business as defined in 11 U.S.C. § 101  [ ] Debtor is and elects to be considered a small business under 11 U.S.C. § 1 121 (e) (Optional)	Filing Fee (Check one box)  [X] Full Filing Fee attached  [ ] Filing Fee to be paid in installments ( attach signed application for the cour debtor is unable to pay fee except in Official Form No. 3.	t's consideration certifying that the				
Statistical/Administrative Information (Estimates only)  [X] Debtor estimates that funds will be available for distribution to unsecured cre  [ ] Debtor estimates that, after any exempt property is excluded and administrated available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY				
Estimated Number of Creditors [X] 1-15 [] 16-49 [] 50-99 [] 100-19  Estimated Assets [X] \$0 to \$50,000 [] \$50,001 to \$100,000 [] 100,001 to \$500,000  Estimated Debts [X] \$0 to \$50,000 [] \$50,001 to \$100,000 [] 100,001 to \$500,000	[ ] \$500,001 to \$1,000,000					

Voluntary Petition (This page must be completed and filed i		e of Debtor(s):				
PRIOR BANKRUPTCY CASE I	FILED WITHIN LAS	ST 6 YEARS (if more	than one, attach additional s	sheet)		
Location Where Filed:	Case Number:		Date Filed:			
PENDING BANKRUPTCY		OUSE, PARTNER, C		OR		
Name of Debtor:	Case Number:		Date:			
District:	Relationship:		Judge:			
	Signa	itures				
Signature(s) of Debtor(s) (Individual declare (or certify, verify, or state) under per the foregoing in true and correct.  [If petitioner is an individual whose debts are debts and has chosen to file under Chapter 7] may proceed under Chapter 7, 11, 12 or 13 of	idual/Joint) enalty of perjury that e primarily consumer I am aware that I	(To be completed if de forms 10K and 10Q) v pursuant to Section 13 1934 and is requesting	Exhibit A  ebtor is required to file periodic with the Securities and Exchang 3 or 15(d) of the Securities Exchangerelief under Chapter 11)	e Commission ange Act of		
Code, understand the relief available under e choose to proceed under Chapter 7.  I request relief in accordance with the chapte States Code, specified in this petition.  X  Signature of Debtor	ach such chapter, and	[ ] Exhibit A is attached and made a part of this petition.  Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such				
XSignature of Joint Debtor	Date	Chapter.  X Signature of Attorn	nev for Debtor(s)	 Date		
Telephone Number (if not represented by a Signature of Attorney	-	Does the debtor own o	Exhibit C or have possession of any proper and identifiable harm to public			
Signature of Attorney for Debtor(s) Daniel M. Moulton Atty Reg# 62006	Date	[ ] Yes, and Exhibit	C is attached and made part of	this petition.		
Printed Name of Attorney for Debtor(s) Law Offices of Daniel <u>Moulton</u> Firm Name 10249 South Western Avenue, Chicago	_	I certify that I am a ba U.S.C. § 110, that I pr	f Non-Attorney Petition Prepankruptcy petition preparer as repared this document for composed the debtor with a copy of this do	defined in 11 ensation, and		
Address (773) 429-1001		Printed Name of B	Sankruptcy Petition Preparer			
Telephone Number  Signature of Debtor(Corporation, I declare under penalty of perjury that the in this petition is true and correct, and that I ha file this petition on behalf of the debtor.	formation provided in		umber urity numbers of all other indiv n preparing this document:	iduals who		
The debtor requests relief in accordance with 11, United States Code, specified in this petiti		sheets conforming to t	on prepared this document, atta the appropriate official form for	ach additional each person.		
X	Date	XSignature of Bankr	cuptcy Petition Preparer	Date		
Printed Name of Authorized Individual			n preparer's failure to comply wand the Federal Rules of Bankru			
Title of Authorized Individual			ind the Federal Rules of Bankru in fines or imprisonment or bot			

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### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

[ ] Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 90035			Auto Loan				\$4,500.00	
Centrix Finance P.O. Box 17669 Denver, CO 80217-0669								
			VALUE \$					
ACCOUNT NO. 18001510-01			Water Bill				\$282.00	
City of Calumet City 204 Pulaski Road PO Box 1519 Calumet City, IL 60409								
Calumet City, IL 60409			VALUE \$					
ACCOUNT NO.								
			VALUE\$					
ACCOUNT NO.								
			VALUE \$					
	_		(То	tal of	Subto this p	otal age)	\$4,782.00	
continuation sheets attached			(Use onl	y on la	Tota ast pa		\$4,782.00	

(Report total also on Summary of Schedules)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

[X] Check this box if debtor has no creditors holding unsecured priority claims to report on this ScheduleE.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

#### [ ] Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

#### [ ] Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

#### [ ] Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### [ ] Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$4,650\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

#### [ ] Deposits by individuals

Claims of individuals up to \$2,100\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

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[ ] Alimony, Maintenance, or Support
Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).
[ ] Taxes and Certain Other Debts Owed to Governmental Units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
[ ] Commitments to Maintain the Capital of an Insured Depository Institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
* Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

continuation sheets attached

#### SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

[ ] Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,  MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0621816028 ComEd							\$1,048.14
Bill Payment Center Chicago, IL 60668-0001							
ACCOUNT NO. 839-39262							\$745.00
Check n Go of Illinois, Inc. 8357 S. Cottage Grove Ave. Chicago, IL 60619							
ACCOUNT NO. 839-4017							\$596.00
Check n Go of Illinois, Inc. 8357 S. Cottage Grove Ave. Chicago, IL 60619							
ACCOUNT NO. 343788000							\$280.00
One Iron Ventures, Inc. dba Instant Cash Advance 1205 E. Sibley Dolton, IL 60419							
		co	ontinuation sheets attached	Subt	otal	\$2.0	669.14
Total					\$		

(Report also on Summary of Schedules)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,  MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 344012735							\$700.00
One Iron Ventures, Inc. dba Instant Cash Advance 1205 E. Sibley Dolton, IL 60419							
ACCOUNT NO. 4-21-52-04886							\$1,000.00
Nicor Gas PO Box 310 Aurora, IL 60507-0310							
ACCOUNT NO.							
ACCOUNT NO.							
	1	l c	ontinuation sheets attached	 Subt	l otal	\$1 <sup>'</sup>	700.00
			(Deposit also on Summore of C	T	otal		369.14

(Report also on Summary of Schedules)